HEALTHY FAMILIES AND PRE-EXISTING INSURANCE CONDITION PLAN INVITATION TO PARTICIPATE





EE Name_

Healthy Families & Pre-Existing Condition Insurance Plan EE/CAA Registration

EE#____625 Coolidge Drive, Suite 100, Folsom, California 95630

Attention: EE/CAA Liaison Department **E-Mail**: <u>ee-caaLiaison@maximus.com</u> **Fax**: (916) 673-4500 **Phone**: (800) 279-5012

SUB-SITE REGISTRATION FORM

(Please complete this registration form for all sites that will be linked to this EE).

29. Contact Name	Title	
30. Service Location Address		
City	State	Zip
E-Mail Address		
Telephone Number ()	Fax Number ()	
31. This site will provide assistance in	the following languages:	
Armenian	Farsi	Russian
Cambodian	Hmong	Spanish
Chinese (Cantonese)	Korean	Vietnamese
English	Laotian	Other
32. This location will accept referrals of	during the hours of: (Check all that apply)	
☐ 8:00 a.m. – 5:00 p.m. M-F	☐ After 5:00 p.m. M-F	Other Hours:
Saturday Hours:	Sunday Hours:	Available By Appointment
Contact Name	Title	
Service Location Address		
City	State	Zip
CityE-Mail Address	State	Zip
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8/24/2011